

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

October 3, 2016

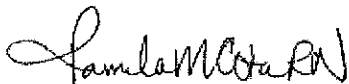
Ms. Wanda Waugh, Manager  
Canterbury Inn  
46 Cherry Street  
Saint Johnsbury, VT 05819-2290

Dear Ms. Waugh:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **August 31, 2016**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,



Pamela M. Cota, RN  
Licensing Chief

Division of Licensing and Protection

SEP 26 2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0119	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 08/31/2016
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CANTERBURY INN

46 CHERRY STREET  
SAINT JOHNSBURY, VT 05819

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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R100 Initial Comments:

R100

An unannounced on site investigation of a self report was conducted by the Division of Licensing and Protection on 8/31/16. The following is a regulatory finding.

R266 IX. PHYSICAL PLANT  
SS=E

R266

9.1 Environment

9.1.a The home must provide and maintain a safe, functional, sanitary, homelike and comfortable environment.

This REQUIREMENT is not met as evidenced by:  
Based on observation and confirmed by staff interview the facility failed to ensure that Oxygen tanks are secured safely to avoid injury. The findings include the following:

Per facility tour at 8:30 AM, in the company of the Personal Care Attendant (PCA), each linen closet on all three (3) floors (basement/main floor/second floor), were found to have portable oxygen tanks (E cylinder), stored in the up right position. None of the tanks were stored in a stand/cart and were not secured in place. Basement has two (2) unsecured tanks, main floor had one unsecured tank and the third level had two (2) unsecured tanks. The PCA confirmed the findings.

On Aug. 31<sup>st</sup>, 2016, I spoke  
w Jeff Holderby @  
AIRGAS. THESE ARE THE FOLKS  
THAT SUPPLY OUR OXYGEN  
TANKS. JEFF HAS ORDERED  
A RACK FOR OUR SIX TANKS.  
IT IS SUPPOSED TO BE  
DELIVERED HERE THE WEEK  
OF SEPTEMBER 26, 2016.  
HE HAS DELIVERED A  
RACK FOR US TO USE  
UNTIL THE NEW ONE  
COMES. WE WILL STORE  
ALL SIX TANKS IN THE  
RACK AT ALL TIMES UNLESS  
A TANK IS BEING USED.  
TANKS BEING USED ARE  
STORED IN PORTABLE  
CARRIERS.

R266 POC accepted 9/29/16 MBohland RN/PMU

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Handa Thraugh*

*Owner/Director*

9/21/2016

STATE FORM

6899

WSN611

If continuation sheet 1 of 1